

DT05 Rec'd PCT/PTO 23 DEC 2004

**Application Data Sheet****Application Information**

Application Number::

Filing Date::

**December 23, 2004**

Application Type::

**US National Phase**

Subject Matter::

**Utility**

Suggested Classification::

Suggested Group Art Unit::

Title::

**SOLID PHARMACEUTICAL COMPOSITION  
CONTAINING A LIPOPHILIC ACTIVE  
PRINCIPLE AND PREPARATION METHOD  
THEREOF**

Attorney Docket Number::

**1169-032**

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

Total Drawing Sheets::

**Applicant Information**

Applicant Authority Type::

**Inventor**

Primary Citizenship Country::

**France**

Status::

Given Name::

**Marie-Line**

Middle Name::

Family Name::

**ABOU CHACRA-VERNET**

Name Suffix::

City of Residence::

**Nice**

State or Province of Residence::

Country of Residence::

**France**

Street of Mailing Address::

**Les Bergeronnettes, 133, Avenue Ste.  
Marguerite**

City of Mailing Address::

Postal or Zip Code::

**F-06200**

Applicant Authority Type:: **Inventor**  
Primary Citizenship Country:: **France**  
Status::  
Given Name:: **Noel**  
Middle Name::  
Family Name:: **ZAKARIAN**  
Name Suffix::  
City of Residence:: **Marseille**  
State or Province of Residence::  
Country of Residence:: **France**  
Street of Mailing Address:: **22, avenue Charles Fabry**  
City of Mailing Address:: **Marseille**  
Postal or Zip Code:: **F-13009**

Applicant Authority Type:: **Inventor**  
Primary Citizenship Country:: **France**  
Status::  
Given Name:: **Dominique**  
Middle Name::  
Family Name:: **TOSELLI**  
Name Suffix::  
City of Residence:: **Nice**  
State or Province of Residence::  
Country of Residence:: **France**  
Street of Mailing Address:: **4bis, boulevard Dubouchage**  
City of Mailing Address:: **Nice**  
Postal or Zip Code:: **F-06000**

Applicant Authority Type:: **Inventor**  
Primary Citizenship Country:: **France**  
Status::  
Given Name:: **René**  
Middle Name::  
Family Name:: **GIMET**  
Name Suffix::  
City of Residence:: **Valbonne**  
State or Province of Residence::  
Country of Residence:: **France**  
Street of Mailing Address:: **1713, routes de Cannes**  
City of Mailing Address:: **Valbonne**  
Postal or Zip Code:: **F-06560**

Applicant Authority Type:: **Inventor**  
Primary Citizenship Country:: **France**  
Status::  
Given Name:: **Claude**  
Middle Name::  
Family Name:: **LARUELLE**  
Name Suffix::  
City of Residence:: **Villeneuve-Loubet**  
State or Province of Residence::  
Country of Residence:: **France**  
Street of Mailing Address:: **18, avenue Bellevue**  
City of Mailing Address:: **Villeneuve-Loubet**  
Postal or Zip Code:: **F-06270**

### Correspondence Information

Correspondence Customer No:: 22429  
Phone Number:: (703) 684-1111  
Fax Number:: (703) 518-5499  
E-Mail Address::

### Representative Information

Representative Customer Number::

Representative Designation:: Registration Number:: Representative Name::  
*Primary or Associate*

### Domestic Priority Information

|                         |                          |                       |                      |
|-------------------------|--------------------------|-----------------------|----------------------|
| Application::           | Continuity Type::        | Parent Application::  | Parent Filing Date:: |
| <b>This Application</b> | <b>National Stage of</b> | <b>PCT/FR03/01933</b> | <b>June 24, 2003</b> |
|                         |                          |                       |                      |

### Foreign Priority Information

|               |                      |                      |                    |
|---------------|----------------------|----------------------|--------------------|
| Country::     | Application Number:: | Filing Date::        | Priority Claimed:: |
| <b>France</b> | <b>02/07831</b>      | <b>June 25, 2002</b> | <b>Yes</b>         |
|               |                      |                      |                    |

### Assignee Information

Assignee Name:: **CLL PHARMA**  
Street of Mailing Address:: **Arenas, 455, promenade des Anglais**  
City of Mailing Address:: **Nice**  
State of Mailing Address::  
Country of Mailing Address:: **France**  
Postal or Zip Code:: **F-06200**